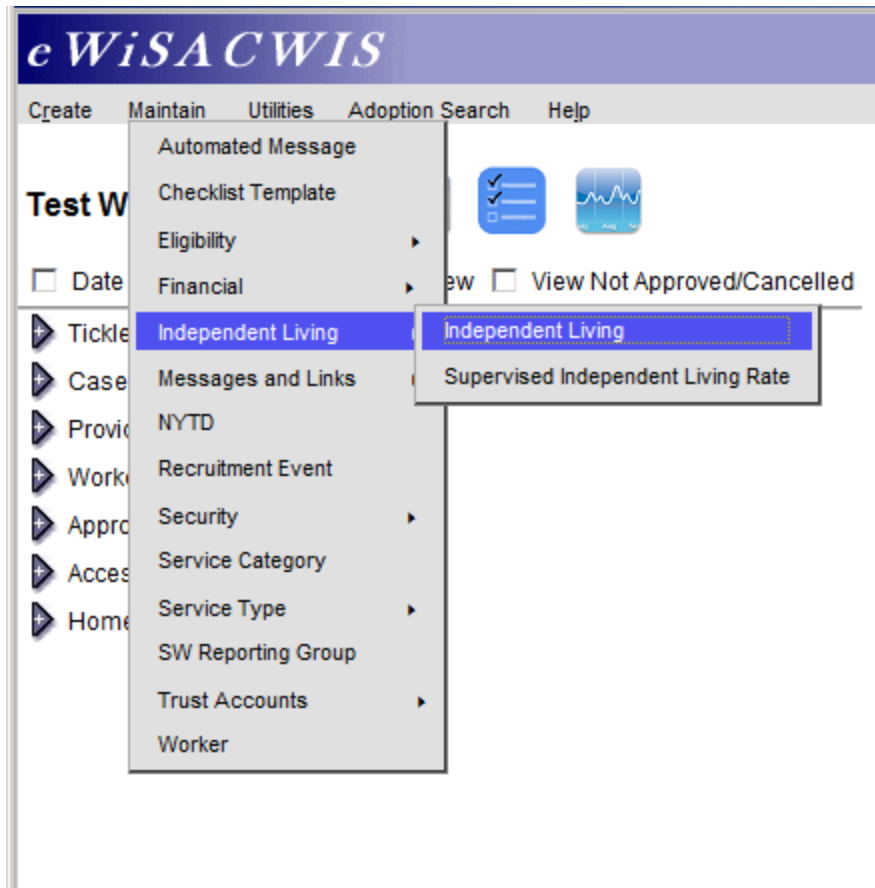


Independent Living

Note: An assignment is not needed to the case to complete Independent Living (IL) work, however additional security is needed.

1. Click on Maintain > Independent Living > Independent Living. This will open the Independent Living page.



2. Click the [Search](#) hyperlink to search for the youth.

Independent Living - Windows Internet Explorer

eWiSACWIS Resource TM Print Spell Check Help

Name
Youth: _____ DOB: _____ Gender: _____ IL Status: _____ [Search](#)

Basic | Contacts | Assessment / Plan | Transition to Discharge | Services

Participant Information

Youth's Highest Grade Level Completed: _____ Special Education Status: _____
Race: _____ Ethnicity: _____ Hispanic / Latino: _____
Indian Tribe Membership: _____ ☐ Tribe Responsible for IL Services
Was the youth ever an adjudicated delinquent? ☐ Yes ☐ No County: _____

Documents Obtained

<input type="checkbox"/> Birth Certificate	<input type="checkbox"/> Education Records	<input type="checkbox"/> Medical Records	<input type="checkbox"/> Selective Service Card
<input type="checkbox"/> Change of Address Card	<input type="checkbox"/> Employment Information	<input type="checkbox"/> NYTD Information	<input type="checkbox"/> Social Security Card
<input type="checkbox"/> Copy of ILTD Plan	<input type="checkbox"/> Immigration Papers	<input type="checkbox"/> Parent's Death Certificate	<input type="checkbox"/> State ID
<input type="checkbox"/> Copy of Permanency Plan	<input type="checkbox"/> Medical Card	<input type="checkbox"/> Placement History	<input type="checkbox"/> Tribal Registration
<input type="checkbox"/> Driver's License			

Comments: _____

Options: _____ [Go](#) [Save](#) [Close](#)

100%

3. Enter the youth's name and click Search. Select the youth by clicking the radio button next to his or her name and click Continue.

Person Search -- Webpage Dialog

eWiSACWIS Print Spell Check Help

Search Criteria

Last Name: First Name: Person ID:
SSN: DOB: Gender:
Street: City: ZIP Code:
☒ Incl. AKA Search Precision: Sort By:
Record 1 to 2 of 2

Persons Returned

☐ [Yen, John \(9229291 \)](#) Male 01/01/2010 Asian Indian
☒ [Yen, Johnny \(9228692 \)](#) 120 N. Carroll St., Madison Male 07/01/1997 Chinese

4. The Independent Living page will display the youth's name with his or her associated person ID, DOB, gender, and IL eligibility status. To update any of the demographic information, click the youth's name (the blue hyperlink) to launch the Person Management page.

The first tab of the page is the Basic tab. All information in the Participant Information group box pre-fills from the youth's Person Management page, except for the last question, "Was the youth ever an adjudicated delinquent?" This question is user selected and must be completed in order to save the page. All information in the Documents Obtained group box is user selected. This is helpful to workers who would like to document what documents they have obtained for youth who will be aging out of care.

Note: When a youth reaches 17 ½, the Region Responsible for IL Services checkbox becomes enabled. This is used to indicate when a youth is being served by the regional agency. The region will display as TBD until regional operations go live for the county identified.

The screenshot shows a web browser window with the address <https://apps.dcf.wisconsin.gov/> and the title "Independent Living - Windows Internet Explorer". The application is titled "eWiSACWIS".

Name: Youth: [Yenn Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Tabs: Basic | Contacts | Assessment / Plan | Transition to Discharge | Services | Outcomes

Participant Information

Youth's Highest Grade Level Completed: Special Education Status: No

Race: Asian

Ethnicity: Chinese

Hispanic / Latino: No

Indian Tribe Membership: N/A ☐ Tribe Responsible for IL Services

Was the youth ever an adjudicated delinquent? ☐ Yes ☒ No County: **Dunn** ☐ Region TBD Responsible for IL Services

Documents Obtained

<input checked="" type="checkbox"/> Birth Certificate	<input type="checkbox"/> Education Records	<input type="checkbox"/> Medical Records	<input type="checkbox"/> Selective Service Card
<input type="checkbox"/> Change of Address Card	<input type="checkbox"/> Employment Information	<input type="checkbox"/> NYTD Information	<input type="checkbox"/> Social Security Card
<input type="checkbox"/> Copy of ILTD Plan	<input type="checkbox"/> Immigration Papers	<input type="checkbox"/> Parent's Death Certificate	<input type="checkbox"/> State ID
<input type="checkbox"/> Copy of Permanency Plan	<input type="checkbox"/> Medical Card	<input type="checkbox"/> Placement History	<input type="checkbox"/> Tribal Registration
<input type="checkbox"/> Driver's License			

Comments:

[More...](#) [Less...](#) [Default](#)

Options: [Go](#) [Save](#) [Close](#)

100%

The Imaging group box on the Basic Tab displays any images with the category of Independent Living. Clicking the insert button allows users to create an image with the Category as Independent Living.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

eWiSACWIS TM Print Spell Check REC Help ?

Name
 Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic | **Contacts** | **Assessment / Plan** | **Transition to Discharge** | **Services** | **Outcomes**

☐ Birth Certificate
 ☐ Education Records
 ☐ Medical Records
 ☐ Selective Service Card
☐ Change of Address Card
☐ Employment Information
☐ NYTD Information
☐ Social Security Card
☐ Copy of ILTD Plan
☐ Immigration Papers
☐ Parent's Death Certificate
☐ State ID
☐ Copy of Permanency Plan
☐ Medical Card
☐ Placement History
☐ Tribal Registration
☐ Driver's License

Comments:

[More...](#) [Less...](#) [Default](#)

Imaging

Type	Date of Document	Image/Document
Other - Independent Living	02/02/2015	Edit

[Insert](#)

Options: [Go](#) [Save](#) [Close](#)

100%

5. The second tab is the Contacts tab. This tab allows you to document all potential contacts for a youth in order to find them after they have aged out of care. Due to the National Youth in Transition Database (NYTD) requirements, workers should have contact with youth at their 19th and 21st birthdays. The Contact Information group box allows you to document the youth's phone and e-mail address. The Key Collateral Contacts will pre-fill with the Parent 1 and Parent 2 information of the child's foster parents at the age of 17. If these are not appropriate, they can be deleted. Other people with eWiSACWIS IDs can be added by clicking the Insert button and doing a person search. The role and e-mail should be entered for each contact.

Also on the Contacts tab is the Other Contacts group box. You can enter all other possible contacts for the youth by clicking Insert and entering the name, role, phone, and e-mail. Comments can be entered for any additional information you would like to record regarding contacts.

The screenshot shows the eWiSACWIS web application in a Windows Internet Explorer browser window. The address bar shows the URL: <https://apps.dcf.wisconsin.gov/> - Independent Living - Windows Internet Explorer. The application header includes the eWiSACWIS logo and navigation links: TM, Print, Spell Check, and Help. The main content area is divided into tabs: Basic, Contacts (selected), Assessment / Plan, Transition to Discharge, Services, and Outcomes. The Contacts tab is active, showing the following sections:

- Contact Information:** A form with fields for Address (120 N. Carroll St., Menomonie, WI 54751), Phone, Cell (715)745-7454, Alt Phone, Primary E-Mail (Johnny645@gmail.com), and Secondary E-Mail.
- Key Collateral Contact:** A table with columns Name, Role, Phone, E-mail, and a Delete button. The table contains one entry: Foster Home, Chris' (Foster Parent, (608)741-1234, chris@gmail.com). An Insert button is located at the bottom right of this section.
- Other Contacts:** A table with columns Name, Role, Phone, and E-mail. An Insert button is located at the bottom right of this section.
- Comments:** A large text area for entering additional information.

At the bottom of the form, there is an Options dropdown menu, a Go button, and Save and Close buttons.

6. The third tab is the Assessment/Plan tab. On this tab you will document the date the Independent Living Assessment was completed and/or revised and a description of the process, tools, and methods used. You will also document the date the Independent Living Plan was completed and/or revised and the anticipated age and living situation at discharge from out of home care. Both the assessment and the plan must be completed when the youth is 15 and has been in out of home care for at least 6 months.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

eWiSACWIS TM Print Spell Check Help

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts **Assessment / Plan** Transition to Discharge Services Outcomes

Independent Living Assessment

Independent Living Assessment Completed: 06/01/2014 Independent Living Assessment Revised: 00/00/0000

Description of the assessment process, tools and methods:

assessment and tools...

[More...](#) [Less...](#) [Default](#)

Independent Living Planning

Independent Living Plan Completed: 06/01/2015 Independent Living Plan Updated: 00/00/0000

Anticipated age of discharge from out of home care:

19

[More...](#) [Less...](#) [Default](#)

Anticipated living situation upon discharge from out of home care:

apartment

[More...](#) [Less...](#) [Default](#)

Options:

100%

7. The fourth tab is the Transition to Discharge tab. Here you will document everything included on the Independent Living Transition to Discharge (ILTD) Plan. This plan must be done 90 days prior to the youth aging out of care.

Note: When a youth is 17 ½ and in an Out of Home Placement, the ILTD Plan will pre-fill to the Case/Permanency Plan.

The first section is for documentation of the youth's eligibility to extend foster care. The questions "Does the youth have an IEP?" and "Is the youth expected to graduate before age 19?" prefill based on the youth's person management record. Clicking the modify link will take the user directly to the Education tab on the Person Management page.

The screenshot shows the eWiSACWIS web application in a Windows Internet Explorer browser window. The address bar displays the URL: <https://apps.dcf.wisconsin.gov/> - Independent Living - Windows Internet Explorer. The application header includes the eWiSACWIS logo and navigation links: TM, Print, Spell Check, and Help. Below the header, the user information section shows: Name: Yen, Johnny (9228692), DOB: 07/01/1997, Gender: Male, IL Status: Eligible, and a Search link. The main navigation tabs are: Basic, Contacts, Assessment / Plan, Transition to Discharge (selected), Services, and Outcomes. The Transition to Discharge tab contains two main sections: "Eligibility for Extension of Out-of-Home Care" and "Transition Planning". The "Eligibility" section includes fields for Removal Date (12/01/2014), Discharge Date, Updated By, and Date. It also contains three questions with radio button options: "Does the youth have an IEP?" (Yes/No), "Is the youth expected to graduate before age 19?" (Yes/No), and "Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?" (Yes/No). Each question has a "Modify" link. Below these questions is a table with columns: Type, Date, Worker, Document, and a "Text" link. The "Type" column has a dropdown menu currently showing "Determination of Eligibility". The "Transition Planning" section includes fields for "Independent Living Transition to Discharge Plan Completed" and "Independent Living Transition to Discharge Plan Updated" (both showing 00/00/0000), "Date of Youth's Anticipated Discharge" (00/00/0000), "Anticipated Age at Discharge", "Date of follow-up appointment following discharge" (00/00/0000), and "Desired method of contact following discharge" (Other (newsletter, Facebook, etc.) with a dropdown menu and a text box containing "Facebook"). At the bottom of the form, there is a "Housing" section, an "Options:" dropdown menu, a "Go" button, and "Save" and "Close" buttons. The browser status bar at the bottom right shows a magnifying glass icon and "100%".

If the youth is found eligible based on the answers to the three questions, the Youth Decision group box will appear. This section is used to document when the youth was made aware of their options for remaining in care and to document the decision to remain in care on a court order or voluntary agreement. If the youth will discharge from care, the Anticipated Transition to Discharge Hearing Date should be documented.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

eWiSACWIS TM Print Spell Check REC Help ?

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts Assessment / Plan **Transition to Discharge** Services Outcomes

Eligibility for Extension of Out-of-Home Care
Removal Date: 12/01/2014 Discharge Date: Updated By: Date:
☒ Yes ☐ No Does the youth have an IEP? [Modify](#)
☐ Yes ☒ No Is the youth expected to graduate before age 19? Anticipated Graduation Date: 06/01/2017 [Modify](#)
☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?
The youth is eligible to continue care up to graduation or age 21 whichever occurs first.
Type Date Worker Document
Determination of Eligibility [Text](#)

Youth Decision
☐ Yes ☐ No The youth has been made aware of options for remaining in care. Date: 00/00/0000 Updated By:
The youth chooses to: ☐ Remain in care under court order. ☐ Remain in care under voluntary agreement. ☐ Discharge from care.
The current dispositional court order ends at: ☐ Age 18 ☐ Age 19 ☐ Anticipated Graduation Date: 06/01/2017 [Modify](#)
☒ Yes ☐ No Request for Transition to Discharge Hearing completed. Anticipated Transition to Discharge Hearing Date: 00/00/0000

Transition Planning
Independent Living Transition to Discharge Plan Completed: 00/00/0000 Independent Living Transition to Discharge Plan Updated: 00/00/0000
Date of Youth's Anticipated Discharge: 00/00/0000 Anticipated Age at Discharge:
Options: [Go](#) [Save](#) [Close](#)

100%

If the youth decides to remain in care a section will appear to attach the scanned court order or voluntary agreement. Select the Type from the drop down and click the Imaging Search hyperlink to search out or create the image. Also available, is the Determination of Eligibility template. This template will prefill the information from the Eligibility for Extension of Out-of-Home Care group box and the Youth Decision group box. Information how to appeal the eligibility decision is listed at the bottom of the template.

Note: The eligibility is not considered “final” until an image has been attached. Attaching the document will freeze the eligibility for the youth.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

eWiSACWIS TM Print Spell Check Help

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts Assessment / Plan **Transition to Discharge** Services Outcomes

Eligibility for Extension of Out-of-Home Care
Removal Date: 12/01/2014 Discharge Date: Updated By: Test Worker Date: 07/01/2015

☒ Yes ☐ No Does the youth have an IEP? [Modify](#)
☐ Yes ☒ No Is the youth expected to graduate before age 19? Anticipated Graduation Date: 06/01/2017 [Modify](#)
☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?
The youth is eligible to continue care up to graduation or age 21 whichever occurs first.

Type	Date	Worker	Document
Determination of Eligibility			Text
CHIPS Dispositional Order			Imaging Search

Youth Decision
☒ Yes ☐ No The youth has been made aware of options for remaining in care. Date: 05/01/2015 Updated By: Test Worker
The youth chooses to: ☒ Remain in care under court order. ☐ Remain in care under voluntary agreement. ☐ Discharge from care.
The current dispositional court order ends at: ☒ Age 18 ☐ Age 19 ☐ Anticipated Graduation Date: 06/01/2017 [Modify](#)
☐ Yes ☐ No Request for Transition to Discharge Hearing completed. Anticipated Transition to Discharge Hearing Date: 00/00/0000

Transition Planning
Independent Living Transition to Discharge Plan Completed: 00/00/0000 Independent Living Transition to Discharge Plan Updated: 00/00/0000

Options: [Go](#) [Save](#) [Close](#)

100%

9234336.0 [Compatibility Mode] - Microsoft Word

TS

Zoom Spell Check Copy From Bookmarks Close and Return to eWISACWIS

Determination of Eligibility

Use of Form: Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04(1)(m), Wisconsin Statutes].

Today's Date 07/01/2015		
Name – Youth Yen, Johnny	Birthdate 07/01/1997	Current Age 18
Date Youth Entered Foster Care 12/01/2014	Date of Youth's Anticipated Discharge 	Anticipated Age at Discharge
Current Address – Youth 120 N. Carroll St., Menomonie, WI 54751		Current Telephone Number – Youth (608)741-1234

Eligibility for Extension of Out-of-Home Care

☒ Yes ☐ No Does the youth have an IEP?

☐ Yes ☒ No Is the youth expected to graduate before age 19?

☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?

The youth **is** eligible to continue care up to graduation or age 21 whichever occurs first.

Youth has been made aware of options for remaining in care.

☒ Yes ☐ No Date: **05/01/2015**

Youth Chooses to:

☒ Remain in care under court order

☐ Remain in care under a voluntary agreement

☐ Discharge from care Anticipated Transition to Discharge Hearing Date:

You or your guardian may appeal the eligibility determination within 10 days of this notice in accordance with rules and procedures of the state's fair hearing and appeal process.

A request for a Hearing shall be in writing addressed to the Agency Director at:

Dunn County Department of Human Services
808 Main St., PO Box 470
Menomonie, WI 54751

If a youth is not eligible for an Extension of Out-of-Home Care, and the youth appeals the decision, the appeal results can be documented by selecting the Create Appeal hyperlink.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

eWISACWIS TM Print Spell Check Help

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts Assessment / Plan **Transition to Discharge** Services Outcomes

Eligibility for Extension of Out-of-Home Care
Removal Date: 12/01/2014 Discharge Date: Updated By: Test Worker Date: 07/02/2015

☒ Yes ☐ No Does the youth have an IEP? [Modify](#)
☐ Yes ☒ No Is the youth expected to graduate before age 19? Anticipated Graduation Date: 06/01/2017 [Modify](#)
☐ Yes ☒ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?

The youth is not eligible to continue care up to graduation or age 21 whichever occurs first. [Create Appeal](#)

Type	Date	Worker	Document
Determination of Eligibility	07/02/2015	Test Worker	Edit

Transition Planning
Independent Living Transition to Discharge Plan Completed: 00/00/0000 Independent Living Transition to Discharge Plan Updated: 00/00/0000
Date of Youth's Anticipated Discharge: 00/00/0000 Anticipated Age at Discharge:
Date of follow-up appointment following discharge: 00/00/0000
Desired method of contact following discharge: Other (newsletter, Facebook, etc.) Facebook

Housing

Options: [Go](#) [Save](#) [Close](#)

100%

In order to launch the template, “Notice of Decision of Appeal of Eligibility,” first make selections for each column. Then select the Reasons hyperlink and choose a reason. Lastly, click Text under Appeal Document.

Extension of Out of Home Care - Appeals -- Webpage Dialog

eWiSACWIS TM Print Spell Check Help

Person Information
 Name: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997

Appeal Record

Appeal Of	Appeal To	Appeal Date	Decision	Decision Date	Appeal Document		
Eligibility Determination	DHA	06/16/2015	Upheld	07/02/2015	Text	Reason(s)	Delete

Supporting Documentation Date: [Imaging Search](#)

9234359.0 [Compatibility Mode] - Microsoft Word

File Copy From Close and Return
 Check Bookmarks to eWiSACWIS

Notice of Decision of Appeal of Eligibility

Use of form: This form is used to notify a child or their guardian of the decision on their appeal of an eligibility decision for extension of out-of-home care. Personally identifiable information on this form is used to verify the information necessary for providing benefits and will be used only for this purpose.

Name and Address Below: Today's Date: 07/02/2015

Child Information

Name: Yen, Johnny
 Birthdate: 07/01/1997
 18th Birthdate: 07/01/2015
 Case ID Number: 9223700

This notice is to inform you that the Request to Appeal the Eligibility Determination has been **Upheld** due to one or more of the following reason(s):

- ☐ The child is eligible for extension of out-of-home care and the agency will enter a Voluntary-Transition-to-Independent-Living Agreement with the child or guardian.
- ☐ The child was not in an out-of-home care placement on or after 8/1/2014.
- ☐ The child did not age out of out-of-home care on or after their 18th birthday.
- ☐ The child is not under the age of 21 years.
- ☒ The child is not a full-time student at a secondary school or its technical or vocational equivalent.
- ☐ The child does not have an individualized education plan under s. 115.787 Wis. Stats.

You or your guardian may appeal the eligibility determination within days of this notice in accordance with rules and procedures of the state's fair hearing and appeal process.

A request for a Hearing shall be in writing addressed to the at:

If a youth who is eligible for the extension discharges from out-of-home care, and later returns to care, a Subsequent Eligibility group box will appear to document that the youth remains eligible. A signed voluntary agreement will need to be attached via Imaging Search. Like the initial extension, a Determination of Eligibility template exists. Select Text to launch the document. If the youth does not qualify for the subsequent extension, the results of the appeal can also be documented in the same way as the initial extension.

Note: This eligibility must be completed in order to approve a placement in eWisacwis for anyone over the age of 19.

Subsequent Eligibility for Extension of Out-of-Home Care

Removal Date:
Discharge Date:
Updated By: Test Worker
Date: 07/02/2015
[Delete](#)

☒ Yes ☐ No Does the youth have an IEP? [Modify](#)

☒ Yes ☐ No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?

The youth is eligible to continue care up to graduation or age 21 whichever occurs first.

Type	Date	Worker	Document	
Determination of Eligibility			Text	
Request to Determine Eligibility				Imaging Search
Voluntary Transition to IL Agreement				Imaging Search

[Insert](#)

In the Transition Planning group box, document the date the plan was completed as well as follow-up dates and contact information.

Note: A date must be entered for the Independent Living Transition to Discharge Plan Completed date in order for the plan to be considered complete and the corresponding tickler deleted.

The screenshot shows the eWiSACWIS web application interface. The browser address bar displays the URL: https://apps.dcf.wisconsin.gov/?action=EDIT&fromWhere=desktop&IL_ID_INDEPENDENT_LIVING=8000762. The application header includes the logo "eWiSACWIS" and navigation links: TM, Print, Spell Check, and Help. Below the header, a form displays the youth's information: Name (Yen, Johnny (9228692)), DOB (07/01/1997), Gender (Male), and IL Status (Eligible). A "Search" button is located next to the IL Status. The main content area has a tabbed interface with tabs for Basic, Contacts, Assessment / Plan, Transition to Discharge (selected), Services, and Outcomes. The "Transition Planning" section contains the following fields: "Independent Living Transition to Discharge Plan Completed" (05/01/2015), "Independent Living Transition to Discharge Plan Updated" (00/00/0000), "Date of Youth's Anticipated Discharge" (06/01/2017), "Anticipated Age at Discharge" (19), "Date of follow-up appointment following discharge" (00/00/0000), and "Desired method of contact following discharge" (Other (newsletter, Facebook, etc.)). A dropdown menu for "Facebook" is visible. The "Housing" section includes a goal statement: "Goal: Safe and secure living environment upon leaving care." and fields for "Anticipated location youth will transition to" (Own apartment / home), "Address youth will transition to", "Housing Resource (if applicable)", "Telephone Number at Housing Resource", and "Description of Activities to Achieve Goal". At the bottom, there is an "Options" dropdown, a "Go" button, and "Save" and "Close" buttons. The browser status bar shows a zoom level of 100%.

https://apps.dcf.wisconsin.gov/?action=EDIT&fromWhere=desktop&IL_ID_INDEPENDENT_LIVING=8000762 - Windows Inter...

eWiSACWIS TM Print Spell Check Help

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic **Contacts** **Assessment / Plan** **Transition to Discharge** **Services** **Outcomes**

Transition Planning
Independent Living Transition to Discharge Plan Completed: 05/01/2015 Independent Living Transition to Discharge Plan Updated: 00/00/0000
Date of Youth's Anticipated Discharge: 06/01/2017 Anticipated Age at Discharge: 19
Date of follow-up appointment following discharge: 00/00/0000
Desired method of contact following discharge: Other (newsletter, Facebook, etc.) Facebook

Housing
Goal: Safe and secure living environment upon leaving care.
Anticipated location youth will transition to: Own apartment / home
Address youth will transition to:
Housing Resource (if applicable): Telephone Number at Housing Resource:
Description of Activities to Achieve Goal:

Options: Go Save Close

100%

The remaining group boxes on this tab are used for documenting progress on goals relating to Housing, Health, Education, Mentors and/or Other Supportive Adults, Opportunities for Continuing Support Services, Income and Employment Services, and Workforce Support.

https://apps.dcf.wisconsin.gov/?action=EDIT&fromWhere=desktop&IL_ID_INDEPENDENT_LIVING=8000762 - Windows Inter...

eWISACWIS TM Print Spell Check Help

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts Assessment / Plan **Transition to Discharge** Services Outcomes

Housing
Goal: Safe and secure living environment upon leaving care.
Anticipated location youth will transition to: Own apartment / home
Address youth will transition to:
Housing Resource (if applicable): Telephone Number at Housing Resource:
Description of Activities to Achieve Goal:
[More...](#) [Less...](#) [Default](#)
Name - Helper:
Date to be Completed: 07/01/2015 Goal Achieved: No Date Goal Achieved: 00/00/0000
Alternate location youth will transition to:
Options: Save Close

100%

8. The fifth tab is the Services tab. The Services tab displays the Independent Living services provided to the youth. Click the Insert button to add services to the page. This will open the Maintain Independent Living Services page.

The screenshot shows a web browser window with the URL https://apps.dcf.wisconsin.gov/?action=EDIT&fromWhere=desktop&IL_ID_INDEPENDENT_LIVING=8000762. The application header is "eWiSACWIS" with navigation links for TM, Print, Spell Check, and Help. Below the header, a form displays youth information: Name (Yen, Johnny (9228692)), DOB (07/01/1997), Gender (Male), and IL Status (Eligible), with a Search button. A tabbed interface includes Basic, Contacts, Assessment / Plan, Transition to Discharge, Services (selected), and Outcomes. The Services tab contains a large text area labeled "Independent Living Services" and an Insert button. At the bottom, there is an Options dropdown, a Go button, and Save and Close buttons. The browser's status bar shows a 100% zoom level.

9. In the Services/Activities group box is a drop-down to enter the IL Service Category (these are federal reporting categories). The [Service Category Definitions](#) hyperlink can be selected to see the federal definitions for each category. The Begin Date, Service/Activity, and Provider/Responsible Person are required fields. The End Date and Specifically Explain Goal/Service/Activity fields are not required; however, in order to make a service historical an End Date must be entered. The County/Agency Providing Service/Activity is a required field and will default to the county or agency of the worker entering the service. This field cannot be changed once the page has been saved. To insert more services, click the Insert button. Click Save to save the service/activity. Remember to enter end dates on closed services. This will make the service historical on the Independent Living Plan template.

Note: When the IL Services Category is “Financial assistance – room and board,” an additional field “Total Amount” displays to document the dollar value. This field is not required until an end date is entered for the service.

When the IL Services Category is “Financial assistance – Education Training Voucher (ETV),” in addition to the Amount field a Type dropdown is also required.

The screenshot shows a web application window titled "Maintain Independent Living Services -- Webpage Dialog" with the "eWiSACWIS" logo. The interface includes a top navigation bar with "Print", "Spell Check", and "Help" options. Below the header, a "Name" section displays "Youth: Yen, Johnny (9228692)", "DOB: 07/01/1997", and "Gender: Male", with a link to "Service Category Definitions".

The "Services/Activities" section contains two rows of service data:

- Row 1 of 2:**
 - IL Service Category: Budget and financial management (with a "Delete" link)
 - Begin Date: 03/01/2015, End Date: 00/00/0000, County/Agency Providing Service/Activity: Dunn
 - Service/Activity: learning to balance a checkbook
 - Provider/Responsible Person: foster parent
 - Specifically Explain Goal/Service/Activity: foster parent will teach you to balance a checkbook
 - Links: More..., Less..., Default
- Row 2 of 2:**
 - IL Service Category: Financial assistance - room and board (with a "Delete" link)
 - Begin Date: 02/01/2015, End Date: 00/00/0000, County/Agency Providing Service/Activity: Dunn
 - Total Amount: \$0.00
 - Service/Activity: (empty field)
 - Provider/Responsible Person: (empty field)
 - Specifically Explain Goal/Service/Activity: (empty field)
 - Links: More..., Less..., Default

At the bottom right, there are buttons for "Insert", "Save", and "Close".

Note: When the Service Category is Financial Assistance – DCF scholarship additional fields for Awarded Amount, Paid Amount, and Institution will appear. An e-mail message is sent when a DCF Scholarship has been awarded. Any Independent Living Coordinators for the County providing the Service/Activity and county workers identified on the IL DCF Scholarship automated message distribution list will be notified.

Services/Activities

IL Service Category:	Financial Assistance - DCF Scholarship		Row 1 of 1
Begin Date:	03/01/2015	End Date:	06/04/2015
	County Providing Service/Activity: Dunn		
Awarded Amount:	1000	Paid Amount:	0
Service/Activity:	DCF Scholarship		
Institution:	UW		
Specifically Explain Goal/Service/Activity:			

10. Once the information is saved on the Maintain Independent Living Services page, the information is summarized on the Services tab.

Note: There are several e-mails to reminder workers to close IL Services. These e-mails will be sent to the worker who entered the service, to the IL Coordinator, and anyone else the county has identified on the corresponding automated message distribution list.

- IL Service - Open for a Year is sent as a reminder once an IL Service reaches a year old. The service will remain open if no action is taken.
- IL Service Ended – Youth Turned 18 is sent when a youth turns 18 and has open IL Services. This ends IL services and they would need to be re-entered if they are continuing to be provided after 18.
- IL Service Ended – Youth Turned 21 is sent when a youth turns 21 and has open IL Services, services are ended.
- IL Service Ended – Youth Turned 23 is sent when a youth turns 23 and has open IL Services, services are ended.

The screenshot shows a web browser window with the address bar displaying <https://apps.dcf.wisconsin.gov/> - Independent Living - Windows Internet Explorer. The page title is **eWiSACWIS**. The navigation bar includes links for Basic, Contacts, Assessment / Plan, Transition to Discharge, **Services**, and Outcomes. The main content area is titled **Independent Living Services** and displays a table of services for a youth named **Yen, Johnny (9228692)** with a DOB of 07/01/1997 and IL Status of Eligible. The table is organized by service category: 'Budget and financial management' and 'Financial assistance - room and board'. Each category contains a table with columns for Service / Activity, Provider / Responsible Person, Begin Date, End Date, and actions (Edit, Delete). The 'Budget and financial management' section shows a service for 'learning to balance a checkbook' provided by a 'foster parent' starting on 03/01/2015. The 'Financial assistance - room and board' section shows a service for 'Room and Board' provided by a 'Worker' starting on 02/01/2015. An 'Insert' button is located at the bottom right of the table area. At the bottom of the page, there is an 'Options:' dropdown menu, a 'Go' button, and 'Save' and 'Close' buttons. The browser's status bar shows a zoom level of 100%.

Independent Living Services					
Service Category: Budget and financial management					
Service / Activity	Provider / Responsible Person	Begin Date	End Date		
learning to balance a checkbook	foster parent	03/01/2015		Edit	Delete
Service Category: Financial assistance - room and board					
Service / Activity	Provider / Responsible Person	Begin Date	End Date		
Room and Board	Worker	02/01/2015		Edit	Delete

11. The sixth and final tab of the Independent Living page is the Outcomes tab. The Outcomes tab will only display when the youth is eligible to take the NYTD survey. A youth is eligible when they are placed in out of home care after their 17th birthday. Only youth who turn 17 after October 1st, 2010, will be prompted to take the NYTD survey. UW Survey Center has been contracted to administer the survey. Youth will receive an e-mail with instructions. The contact info for UW Survey Center is listed on the page.

The screenshot shows the eWiSACWIS web application interface. At the top, the URL is https://apps.dcf.wisconsin.gov/?action=VIEW&fromWhere=search&IL_ID_INDEPENDENT_LIVING=8000762&. The page title is "eWiSACWIS". The user is logged in as "Youth: Yen, Johnny (9228692)". The youth's DOB is 07/01/1997, Gender is Male, and IL Status is Eligible. The "Outcomes" tab is selected, showing the "NYTD 17 Survey" section. The "Due Date" is 06/22/2015, "Completed Date" is blank, and "Outcomes" is N/A. There is a checkbox labeled "Youth did not complete the survey" and a "Reason" dropdown menu. The "Worker" and "Updated" fields are also present. At the bottom, there is an "Options" dropdown, a "Go" button, and "Save" and "Close" buttons.

12. There are several reasons why a youth may not complete the survey. To document this, check the checkbox the 'Youth did not complete the survey,' and select a reason why the youth did not complete it from the Reason drop-down. This also satisfies the NYTD requirements.
13. Once a completed survey has been received, the Completed Date will indicate the date the youth completed the survey. The Outcomes field will either show a [View](#) hyperlink or N/A. Clicking the [View](#) hyperlink will launch the survey the youth took. If N/A is displayed, this indicates the youth did not give permission for their answers to be shared.

Note: There can be up to a two-week wait time for eWiSACWIS to receive the youth survey.

Youth who complete a survey at age 17 will also be asked to take the survey at age 19 and 21. The NYTD 19 Survey and NYTD 21 Survey group boxes will appear when the respective reporting period is reached.

Note: If the checkbox, "Youth did not complete the survey" is selected for the NYTD 17 Survey, or the survey was not completed on time, the NYTD 19 & 21 Survey group boxes will not appear.

National Youth in Transition Survey for Wisconsin Youth Age 17

Foster Club Profile ID: 9376707

Date of Survey: 10/21/2010

Date of Birth: 10/05/1993

First Name: Youth MI: Last Name: Example Suffix :

Q1. Address: Street Number: 777 Street Name: 1st Ave Apt # :

City: Madison State: WI Zip Code: 55555

Phone: (608)777-7777 Email: youth_example@email.com

EMPLOYMENT

Q2. Currently are you employed full-time?

☐ Yes

☒ No

☐ Declined

Q3. Currently are you employed part-time?

☐ Yes

☒ No

☐ Declined

14. The Options drop-down contains the Independent Living Plan template, the Independent Living Transition to Discharge template, and the Voluntary Transition to Independent Living Agreement template. All templates can be launched from any tab on the Independent Living page.

https://apps.dcf.wisconsin.gov/ - Independent Living - Windows Internet Explorer

ViSACWIS TM Print Spell Check ABC Help ?

Name
Youth: [Yen, Johnny \(9228692\)](#) DOB: 07/01/1997 Gender: Male IL Status: Eligible [Search](#)

Basic Contacts Assessment / Plan Transition to Discharge Services Outcomes

For more information contact the University of Wisconsin Survey Center at 1-800-291-8624 and ask for extension 9991.

NYTD 17 Survey

Due Date: 08/15/2014 Completed Date: Outcomes: N/A

☐ Youth did not complete the survey Reason: Worker: Updated:

Text
Independent Living Plan
Independent Living Transition to Discharge Plan
Voluntary Transition to Independent Living Agreement

Options: Go Save Close

15. Information from the Independent Living page will pre-fill and not be editable on either the Independent Living Plan or Independent Living Transition to Discharge Plan templates.

INDEPENDENT LIVING AND TRANSITION PLANNING

Name – Youth Yen, Johnny		Birthdate 07/01/1997	Gender Male
Independent Living Assessment			
Date Completed 06/01/2014		Date Revised 	
Description of the assessment process, tools, and methods assessment and tools...			
Independent Living and Transition Plan			
Independent Living Plan Completed 06/01/2015		Independent Living Plan Updated 	
Independent Living Transition to Discharge Plan Completed 05/01/2015		Independent Living Transition to Discharge Plan Updated 	
Anticipated age of discharge from out of home care 19			
Anticipated living situation upon discharge from out of home care apartment			
Current Services / Activities			
Independent Living Service Category Budget and financial management			
Service / Activity learning to balance a checkbook	Begin Date 03/01/2015	End Date 	
Provider / Responsible Person foster parent			
Specifically Explain Goal / Service / Activity foster parent will teach you to balance a checkbook			

Independent Living Transition to Discharge (ILTD) Plan

Use of form: Planning for a youth's transition to discharge and independent living must begin six months prior to a youth's 18th birthday with activities completed in the 90 days prior to discharge. The plan must include the specific options for transitioning from out-of-home care to self-sufficiency listed below. All planning and services provided must be documented on the Independent Living (IL) page in eWISACWIS. Personal information you provide may be used for secondary purposes [Privacy Law, s. 15.04 (1)(m), Wisconsin Statutes].

Today's Date 07/06/2015		
Name – Youth Yen, Johnny	Birthdate 07/01/1997	Current Age 18
Date Youth Entered Foster Care 	Date of Youth's Anticipated Discharge 06/01/2017	Anticipated Age at Discharge 19
Current Permanency Goal 		
Concurrent Permanency Goal 		
Current Address – Youth 120 State Street, Madison, WI 53705		Current Telephone Number – Youth
Current Email Address (optional) Johnny645@gmail.com		
Eligibility for Extension of Out-of-Home Care		
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Does the youth have an IEP?		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Is the youth expected to graduate before age 19?		
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Will the youth be a full-time student at a secondary school or its vocational or technical equivalent after age 18?		
The youth is not eligible to continue care up to graduation or age 21 whichever occurs first.		
Youth has been made aware of options for remaining in care.		
<input type="checkbox"/> Yes <input type="checkbox"/> No Date: 		
Youth Chooses to:		
<input type="checkbox"/> Remain in care under court order		
<input type="checkbox"/> Remain in care under a voluntary agreement		
<input type="checkbox"/> Discharge from care Anticipated Transition to Discharge Hearing Date: 		

Information will prefill to the Voluntary Transition to Independent Living Agreement template, but some information is still required to be entered on the template.

Voluntary Transition to Independent Living Agreement

Use of form: This voluntary agreement to extend care may be used for a person who is eligible under Wisconsin Statute Section 48.366 or 938.366 for Extended Out-of-Home Care and is placed in an approved foster home, group home, residential care center for children and youth, in the home of an approved relative other than a parent, or in an approved supervised independent living arrangement. A person who is eligible under Wisconsin Statute Section 48.366 or 938.366 for Extended Out-of-Home Care, or the person's authorized guardian, and the appropriate agency which was primarily responsible for providing services to the person under a prior order or the appropriate agency where the person resides may enter into a transition-to-independent-living agreement under which the person continues in out-of-home care until age 21 if the person continues to be a full-time student at a secondary school or its vocational or technical equivalent under an individualized education program, meets all other eligibility requirements and conditions of the agreement, and the agency provides services to the person to assist him or her in transitioning to independent living.



I Johnny Yen, born on 07/01/1997
(First, MI, Last) (mm/dd/yyyy)

herby request Dunn County Department of Human Services, to continue to live or place me into:
(County Department, BMCW or DCF)

☒ foster home ☐ treatment foster home ☐ relative home ☐ group home ☐ Supervised Independent Living ☐ RCC

Placement dates are from to
(mm/dd/yyyy) (mm/dd/yyyy)

□

I understand that I or my authorized guardian may terminate this agreement at any time before my 21st birthday.

I understand that a Permanency Plan, under s. 48.38 or s. 938.38 Wis. Stats., will be prepared and reviewed by a court and that I will be involved in the development and review of my Permanency Plan.

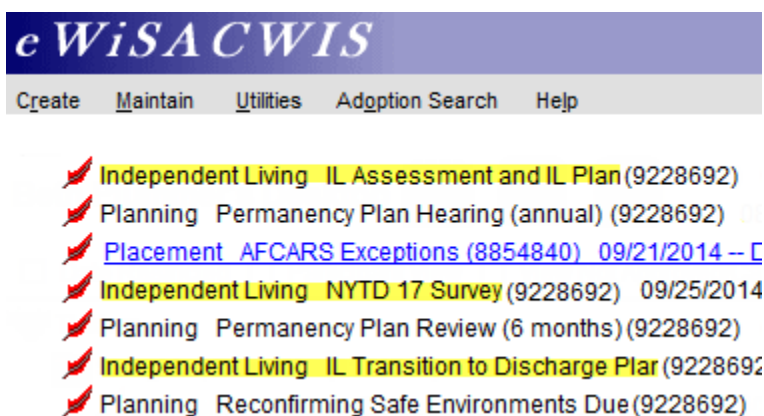
I agree to:

- Maintain enrollment as a full-time student at a secondary school or its technical or vocational equivalent;
- Be the subject of an individualized education plan under s. 115.787 Wis. Stats.
- Comply with school attendance requirements in my individualized education program under s. 115.787 Wis. Stats., school district policies, and truancy laws and ordinances;
- Grant placement and care responsibility to the agency named above;
- Participate in activities assigned by my agency to prepare me for independent living;
- Live in out-of-home care in a foster home, group home, residential care center for children and youth, in the home of an approved relative other than a parent or in an approved supervised independent living arrangement approved by (County Agency, BMCW or DCF).
- Inform the agency named above of my whereabouts and not have periods of time in which I would be considered missing from out-of-home care;
- Maintain regular contact with the agency named above;
- Notify the agency above within 10 days of any change in circumstances that affects my complying with this agreement, including but not limited to changes in my living arrangements, school status, and my participation in independent living activities assigned by my agency.

16. There are three ticklers associated with Independent Living: IL Assessment and IL Plan, IL Transition to Discharge, and NYTD 17 Survey. The IL Assessment and IL Plan tickler will appear when the youth is 15 and has been in care for six months. The tickler will be deleted upon entering a date in the Independent Living Assessment Completed and Independent Living Plan Completed field on the Assessment/Plan tab of the Independent Living page. The NYTD 17 Survey tickler will appear when the youth is in out of home care on or after their 17th birthday, and their 17th birthday is after October 1st, 2010. The tickler will be deleted when the NYTD survey has been received or by selecting the “Youth did not complete the survey” checkbox, if applicable. The IL Transition to Discharge tickler will appear when the youth is 17 ½. The tickler will be deleted upon entering a date in the Independent Living Transition to Discharge Plan Completed field on the Transition to Discharge tab.

Note: A Permanency Plan cannot be completed if the IL Transition to Discharge tickler is overdue.

Here is an example of the IL Assessment and Plan tickler, as well as the NYTD 17 Survey tickler.



17. If you have an assignment to the case, Independent Living will appear on the desktop under the Planning icon:

